



United States Department of Agriculture  
Food and Nutrition Service

Southeast Region

Reply to  
Attn. of: CN 11

July 23, 2002

**Subject:** CACFP 226.20-26/NSLP 210.10-32/SFSP 225.16-15: Clarification of Information on Iron-fortified Infant Formulas Which Do Not Require A Medical Statement in the Child Nutrition Programs

**To:** All State Directors:  
Child Nutrition Programs (CNP)  
Child and Adult Care Food Programs (CACFP)  
National School Lunch Programs (NSLP)  
Summer Food Service Programs (SFSP)  
Southeast Region

This policy memorandum is written as a supplement to the corrected policy memorandum - **CACFP 226.20-12/NSLP 210.10-26/SFSP 225.16-16: Revised List of Iron-fortified Infant Formulas Which Do Not Require A Medical Statement in the Child Nutrition Programs**, in order to clarify information concerning infant formulas purchased by the child care provider that require a medical statement.

**Question 1: Which infant formulas purchased by the child care provider require a medical statement?**

**Answer:**

A medical statement is required in order to serve any infant formulas which do not meet the definition of infant formula in the CACFP and NSLP regulations. In those regulations, infant formula means:

“any iron-fortified infant formula, intended for dietary use as a sole source of food for normal, healthy infants served in liquid state at manufacturer’s recommended dilution.”

Iron-fortified infant formula is defined by the Food and Drug Administration (FDA) as a product “which contains 1 milligram or more of iron in a quantity of product that supplies 100 kilocalories when prepared in accordance with label directions for infant consumption.” The number of milligrams of iron per 100 kilocalories of formula is on the nutritional label of infant formulas. The CACFP definition of infant formula has sufficient flexibility to allow milk and soy-based formula for healthy infants and lactose intolerant infants who do not have other medical conditions which prohibit the use of formula as defined (see Policy Memorandum **CACFP 226.20-12/NSLP 210.10-26/SFSP 225.16-16: Revised List of Iron-fortified Infant Formulas Which Do Not**

**Require A Medical Statement in the Child Nutrition Programs** for a listing of iron-fortified infant formulas which do not require a medical statement).

Formulas which require a statement from a recognized medical authority are identified below. Such statements must include the recommended infant formula.

- 1) Low-iron infant formulas. These infant formulas contain less than 1 milligram of iron per 100 kilocalories of formula. Examples include the low-iron versions of Enfamil and Similac. The labels on these formulas do not indicate that they are fortified with iron.
- 2) “Follow-up”/“Toddler” formulas when served to infants less than a specified age. Follow-up formulas (i.e., formulas designed for older infants or toddlers who are consuming solid foods) are not intended for dietary use as a sole source of food for infants. A medical statement is required in order to serve the follow-up formulas to any infant less than four months of age. A medical statement is required in order to serve the follow-up “Toddler” formulas to any infant less than six months of age. (See Policy Memorandum CACFP 226.20-12/NSLP 210.10-26/SFSP 225.16-16: Revised List of Iron-fortified Infant Formulas Which Do Not Require a Medical Statement in the Child Nutrition Programs for a listing of the specific iron-fortified “Follow-up”/ “Toddler” formulas).
- 3) Exempt infant formulas. These are a group of specialty infant formulas that are intended for use by infants who have an inborn error of metabolism or low birth weight or who otherwise have an unusual medical or dietary problem. Some examples of these formulas include Nutramigen, Pregestimil, Alimentum, and Lofenalac. If a child care provider has a question about whether an infant formula falls into this “exempt” category, the provider should contact his or her sponsor or State agency for technical assistance.

**Question 2: Please indicate whether or not the meal/supplement is reimbursable when the parent provides a formula not meeting meal pattern requirements and the caregiver provides the remaining required components. When parents provide the infant formula, is it required that either an iron-fortified formula or a medical statement justifying the need for a low-iron or “special” [exempt] formula be provided?**

**Answer:**

FCS Instruction 784-3, “Reimbursement for Meals Provided by Parents in the Child Care Food Program,” allows for reimbursement for a meal which includes a substituted food item provided by a parent for medical reasons, such as infant formula, as long as the provider supplies at least one required meal component. A medical statement is required for all infant formulas which do not meet the regulatory definition for infant formula, as noted above. A medical statement is not required for the iron-fortified infant formulas listed in **Policy Memorandum CACFP 226.20-12/NSLP 210.10-26/SFSP 225.16-16: Revised List of Iron-fortified Infant Formulas Which Do Not Require a Medical Statement in the Child Nutrition Programs**.

Should you have any questions regarding this information please contact this office.

CHARLIE SIMMONS  
Regional Director  
Special Nutrition Programs